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Michelle M. Robinson (Depositor's name) Michelle IV. Kobi (Siemature 03/23/2011 Disco

TOTAL FEE(S) DUE

\$1810

DATE DUE

03/23/2011

ATTORNEY DOCKET NO CONFIRMATION NO. FILING DATE FIRST NAMED INVENTOR ADDITICATION NO 6867 10/542 549 12/22/2005 David Tibor Julian Liley P06903US0

PURLICATION FEE DUT

\$300

CLASS-SUBCLASS 600.544000

TITLE OF INVENTION: METHOD OF MONITORING BRAIN FUNCTION SMALL ENTITY

NO

I. Change of correspondence address or indication of "Fee Address" (37 CTR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/1/22) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47, Rev 03-02 or more recent) attached. Use of a Customer Number is required.	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, atternatively. (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.	12
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